

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000013063

**Entity Name:** FLY BOX USA SERVICES LLC

**Current Principal Place of Business:**

200 172ND ST. APT 420  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

3581 SW 16TH CT  
FORT LAUDERDALE, FL 33312 US

**FEI Number:** 46-4636414

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FONNEGRA, LUIS M  
3581 SW 16TH CT  
FORT LAUDERDALE, FL 33312 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FONNEGRA, LUIS M  
Address 3581 SW 16TH CT  
City-State-Zip: FORT LAUDERDALE FL 33312

Title MGRM  
Name APONTE, CLARA F  
Address 3581 SW 16TH CT  
City-State-Zip: FORT LAUDERDALE FL 33312

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUIS M FONNEGRA

MGRM

04/25/2025

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date